Please type a plus (+) sign in this box ->

PTO/SB/05 (4/98) Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE PATENT OF COM

## UTILITY PATENT APPLICATION **TRANSMITTAL**

only for new non-provisional applications under 37 C.F.R. § 1.53(B))

Attorney Docket No. S01.12-0841/STL 10302 First Inventor or Application Identifier

Martin L. Plumer BEVELED WRITING POLE OF A PERPENDIC WRITING ELEMENT Express Mail Label No.

EV 049898337 US

See N	-		ATION ELEMENT erning utility patent	Assistant Commissioner for Patents  Address To: Box Patent Application Washington, DC 20231										
1.			al Form e.g., PTO/S and a duplicate for fee			5.	□ <i>\</i>	Microfiche Cor	mputer Prog	gram (App	endix	()		
2.	X Specif	fication	[Total	Sheets	<b>25</b> ]	6.		Nucleotide and			nce Si	ubmission		
			ment set forth below e of the Invention)				a.	If applicable, a □ Com	a <i>ll necessary</i> puter Reada					
		•	ces to Related App	olications			b.		er Copy (Ide		omput	er copy)		
	- State	ement Reg	garding Fed sponso	ored R & D			C.		ement verify		-			
	- Refe	rence to N	Microfiche Appendix	x			Α	CCOMPANY						
	- Back	- Background of the Invention						7.   Assignment Papers (cover sheet & document(s))						
6 8 8 8 8 8	- Brief		y of the Invention on of the Drawings	(if filed)		8.	N (v			73(b) Statement  Power of Attorney				
	- Clair	n(s)	Disclosure			9.		English Tran						
			U.S.C. § 113)	[Total Sheets	s <b>7</b> ]	10.	X	Information D Statement (II		TO)		Copies of ID	os	
4.	Oath or Dec	laration	[Total	al Sheets	<b>3</b> ]	11.		Preliminary A	Amendment					
<b>a</b> .	X	Newly exe	ecuted (original or o	сору)		12.	X	Return Rece	eipt Postcard	(MPEP 5	03)			
b.		Copy from	n a prior application divisional with Box 17	n (37 C.F.R §	3 1.63(d))	13.		*Small Entity Statement(s) (PTO/SB/09-12	) Stat			rior applicatio nd desired	on.	
	i,		DELETION OF INVE		ina	14.		Certified Cop	by of Priority		t(s)			
			inventor(s) named see 37 C.F.R. §§1.	in the prior ap	plication,	15.		Request and	l Cert. Under	35 USC	122 (N	lon-Pub)		
FEE.	S, A SMALL ENT	TITY STATEM	RDER TO BE ENTITLED MENT IS REQUIRED (37 MCATION IS RELIED UP	O TO PAY SMALL C.F.R. § 1.27), EX	ENTITY XCEPT	16.		Other:			•••••	•••••		
17.			PLICATION, chec	ck appropriate	box, and sup	ply the requ				-				
		ontinuation	☐ Divisional		ation -in part	(CIP)	of pric	or application N						
	<b>FOR CONTIL</b>	NUATION	information: or DIVISIONAL AP		entire disclo				om which ar					
	under Box 4	o, is consid	dered a part of the d ration can only be r	isclosure of th	he accompai	nying conti	inuatio	n or divisional	application	and is her	eby in	ncorporated I		
			Serion ver		. CORRES			y omittet		a	,- p.100	par 103.		
Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here)														
Brian D. Kaul														
Name		WESTMAN CHAMPLIN & KELLY												
Addra	Address Suite 1600 – International Centre 900 South Second Avenue											<del></del>		
City	<u> </u>				MN			Zip Code	5540	2-33	319			
Country	USA			(612) 3	34-32	22	Fa	(612		4-3312				
	ma (D	D:	D Kend		elephone			Annation N	===		005		$\Box$	
	Name (Print/type) Brian D. Kaul						Regis	stration No. (Atto		41,8				
Sign	nature	1 -4	14-10						Date	1/04	1/02	i	I	

	-							Comple	ete if Kno												
							Application No.  Filing Date  First Named Inventor  Title  Group Art Unit				iled Herewith	و ا									
											Filed Herewith  Martin L. Plumer et al.  BEVELED WRITING POLE OF A PERPENDICULAR WRITING ELEME										
															<u> </u>	· =					
															Examiner Name						
											Total Amount of Payment \$ 776 & \$40  METHOD OF PAYMENT (Check One)							Atty. Docket Number			
								FEE CALCULATION (Continued)													
. 1571							3. ADE	DITIONAL	FEES												
					rge any addition ading any petit		Laura														
and credit any over payments to Deposit Account No. <u>23-1123</u> .  Westman, Champlin & Kelly, P.A.						<u>23</u> .	Large Entity Small E Fee Fee Fee			l Entity Fee	Fee Description	Fee									
.,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,					(4)	0.1	<b>(4)</b>	·	Paid									
2. X Check Enclosed							Code	(\$)	Code	(\$)											
200						·	105	130	205	65	· ·										
FEE CALCULATION							127	50	227	25	5 Surcharge - Late provisional Filing Fee or cover sheet										
. BA	SIC FILI	NG FEE	<u> </u>				139	130	139	130	Non-English specification										
Large Entity Small Entity							147	2,520	147	2,520	For Filing a Request for Reexamination. (ex parte)										
Fee	Fee	Fee	Fee				115	110	215	55	Extension for reply within first month										
Code	<u>(\$)</u>	Code			escription		116	400	216	200	Extension for reply within second month										
101	740	201	370	<u> </u>	lity Filing Fee		117	920	217	460	Extension for reply within third month										
106	330	206	168		ign Filing Fee		118	1,440	218	720	Extension for reply within fourth month										
108 740 208 370 ☐ Reissue Filing Fee 114 160 214 80 ☐ Prov Filing Fee					128	1,960	280	980	Extension for reply within fifth month												
114	160	214	80	) Prov	Filing Fee		120	320	220	160	Filing a brief in support of an appeal										
					Subtotal	(1) \$ 740	121	280	221	140	Request for oral hearing										
2. EXTRA CLAIM FEES					148	110	248	55	Terminal Disclaimer Fee												
	Numb Claim		rior**	Extra	Fee from Below	Fee Paid	140	110	240	55	5 Petition to Revive - unavoidable										
Total	22	2	0	2	18	36	141	1,310	241	670	Petition to Revive - unintentional										
ndep.	3	3		0	84	0	142	1,310	242	670	Utility/Reissue issue fee (inc. advance copies)										
Multiple Dependent Claims					143	490	243	260	Design issue fee (inc. advance copies)												
** Insert 3 and 20, or number previously paid if greater, Reissue see below					122	130	122	130	Petitions to the Commissioner												
Large Fee <u>Code</u>	Entity Fee _(\$)	Small Fee Code	Entity Fee _(\$)_	Description	on		123	50	123	50	Petitions related to provisional applications										
103 102	18 84	203 202	9 42		excess of 20 ent claims in e	excess of 3	126	180	126	180	Submission of Information Disclosure Statement										
104	280	204	140	Multiple D	ependent Clai	ims	581	40	581	40		0.45									
109 84 209 42 Reissue Independent Claims over Original Patent										-,0	property (times number of properties)	\$40									
110 18 210 9 Reissue claims in excess of 20 and over original patent							Other F	ee (speci	ify)												
		. <		<b></b>	Subtota	1 (2) \$ 36					Subtotal	(3) \$									

Reg No. 41,885

Signature \_\_\_\_\_(Brian D. Kaul) Date 1/4/02

Deposit Account No. 23-1123